

Interim Clinical Considerations for Use of mRNA COVID-19 Vaccines Currently Authorized in the United States (last updated February 10, 2021)

<https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#phrecs>

EXCERPT: Public health recommendations for vaccinated persons

While mRNA COVID-19 vaccines have demonstrated high efficacy at preventing severe and symptomatic COVID-19, there is currently limited information on how much the vaccines might reduce transmission and how long protection lasts. In addition, the efficacy of the vaccines against emerging SARS-CoV-2 variants is not known. At this time, vaccinated persons should continue to follow **current guidance** to protect themselves and others, including wearing a mask, staying at least 6 feet away from others, avoiding crowds, avoiding poorly ventilated spaces, covering coughs and sneezes, washing hands often, following [CDC travel guidance](#), and following any applicable workplace or school guidance, including guidance related to personal protective equipment use or SARS-CoV-2 testing.

However, vaccinated persons with an exposure to someone with suspected or confirmed COVID-19 are not required to [quarantine](#) if they meet all of the following criteria:

- Are fully vaccinated (i.e., ≥ 2 weeks following receipt of the second dose in a 2-dose series, or ≥ 2 weeks following receipt of one dose of a single-dose vaccine)
- Are within 3 months following receipt of the last dose in the series
- Have remained asymptomatic since the current COVID-19 exposure

Persons who do not meet all 3 of the above criteria should continue to follow current [quarantine guidance](#) after exposure to someone with suspected or confirmed COVID-19.

Although the risk of SARS-CoV-2 transmission from vaccinated persons to others is still uncertain, vaccination has been demonstrated to prevent symptomatic COVID-19; symptomatic and pre-symptomatic transmission is thought to have a greater role in transmission than purely asymptomatic transmission. Additionally, individual and societal benefits of avoiding unnecessary quarantine may outweigh the potential but unknown risk of transmission, and facilitate the direction of public health resources to persons at highest risk for transmitting

SARS-CoV-2 to others. This recommendation to waive quarantine for people with vaccine-derived immunity aligns with [quarantine recommendations for those with natural immunity](#), which eases implementation.

Fully vaccinated persons who do not quarantine should still watch for [symptoms of COVID-19](#) for 14 days following an exposure. If they experience symptoms, they should be clinically evaluated for COVID-19, including SARS-CoV-2 testing, if indicated. In addition, vaccinated persons should continue to follow [current guidance](#) to protect themselves and others, including all other [SARS-CoV-2 testing recommendations](#) and requirements, and [state, territorial, tribal, and local](#) travel recommendations or requirements. For additional considerations regarding quarantine or work restrictions for fully vaccinated healthcare personnel, patients, or residents in healthcare settings, please see section below.

These quarantine recommendations for vaccinated persons, including the criteria for timing since receipt of the last dose in the vaccination series, will be updated when more data become available and additional COVID-19 vaccines are authorized.

[†]CDC has not systematically evaluated the efficacy of COVID-19 vaccines from manufacturers that have not sought an EUA in the United States. For the purposes of these quarantine criteria, considerations for accepting a vaccination series that is not FDA-authorized include whether the vaccine product has received emergency approval from the World Health Organization or authorization from a national regulatory agency.

Vaccinated healthcare personnel, patients, and residents in healthcare settings

These criteria could also be applied when considering work restrictions for fully vaccinated healthcare personnel with [higher-risk exposures](#), as a strategy to alleviate staffing shortages. Of note, exposed healthcare personnel would not be required to quarantine outside of work.

As an exception to the above guidance no longer requiring quarantine for fully vaccinated persons, **vaccinated inpatients and residents in healthcare settings should continue to [quarantine](#) following an exposure** to someone with suspected or confirmed COVID-19; outpatients should be cared for using

appropriate [Transmission-Based Precautions](#). This exception is due to the unknown vaccine effectiveness in this population, the higher risk of severe disease and death, and challenges with social distancing in healthcare settings. Although not preferred, healthcare facilities could consider waiving quarantine for vaccinated patients and residents as a strategy to mitigate critical issues (e.g., lack of space, staff, or PPE to safely care for exposed patients or residents) when other options are unsuccessful or unavailable. These decisions could be made in consultation with public health officials and infection control experts.

CDC's [healthcare infection control guidance](#) contains additional considerations regarding the need to protect healthcare personnel, patients, and residents while also alleviating any staffing shortages.